

**U.S. Department of Justice
United States Marshals Service**

PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA		RECEIVED 2007 MAR 23 A 11:53		COURT CASE NUMBER CR No. 04-10129-RCL	
DEFENDANT MARK A. MCARDLE				TYPE OF PROCESS PRELIMINARY ORDER OF FORFEITURE	
SERVE AT	Janice Bassil, Esquire Carney & Bassil. 20 Park Plaza, Suite 1405, Boston, MA 02116			2007 MAR 23 U.S. MARSHAL'S SERVICE BOSTON, MA RECEIVED U.S. MARSHAL'S SERVICE BOSTON, MA 31	
	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)		Number of process to be served with this Form - 285		
Kristina E. Barclay, Assistant U.S. Attorney United States Attorney's Office John Joseph Moakley United States Courthouse 1 Courthouse Way, Suite 9200 Boston, MA 02210		Number of parties to be served in this case	A 31		
		Check for service on U.S.A.			
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)					
Please serve the attached Preliminary Order of Forfeiture upon the above-referenced individual by certified mail, return receipt requested.					
LJT x3283					
Signature of Attorney or other Originator requesting service on behalf of : <i>Kristina E. Barclay/LJT</i>		<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT		TELEPHONE NUMBER (617) 748-3100	DATE March 16, 2007
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE					
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. <u>38</u>	District of Origin No. <u>38</u>	District to Serve No. <u>49</u>	Signature of Authorized USMS Deputy or Clerk <i>Mary H. M.</i>	Date <u>3/21/07</u>
I hereby certify and return that I <input type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.					
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).					
Name and title of individual served (If not shown above).				<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.	
Address (complete only if different than shown above)				Date of Service <u>5/10/07</u>	Time am pm
<input type="checkbox"/> Signature of U.S. Marshal or Deputy <i>Joe L. Lewis</i>					
Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount Owed to US Marshal or Amount or Refund
REMARKS: <i>Return receipt Card received back at USMS/NH office on 5/10/07</i>					